

PROCEEDINGS OF THE BOARD OF HEALTH MEETING
Tuesday, September 10, 2013
5:00 PM

Present: Joe Van Deurzen, Harold Pfothhauer, Audrey Murphy, J.J. Tibbetts, MD, Don Murray

Excused: Patricia Bacelis-Leon

Staff Present: Judy Friederichs, Chua Xiong, Rob Gollman, Rebecca Nyberg, Meredith Hansen, Tiffany Duenus BSN through UWGB

1. CALL TO ORDER, WELCOME AND INTRODUCTIONS

2. APPROVAL / MODIFICATION OF THE AGENDA

MOTION: To approve Van Deurzen / Pfothhauer

MOTION CARRIED

3. APPROVAL OF MINUTES OF JULY 30, 2013

MOTION: To approve. Van Deurzen / Tibbetts

MOTION CARRIED

4. ODOR COMPLAINTS / ORDINANCE

Rob Gollman indicated he provided everyone with copy of odor complaints dating back to the start of the year in a spreadsheet. He is going to talk about the period from 7-31-13 to today following the procedure John Paul did in the past. If there is different information the board would like presented, Rob is open to new ideas. In that period there were 12 odor complaint calls and all 12 were related to Sanimax – 3 calls were verified and 9 were not. There were no citations issued. We have two citations pending which were issued in June. Rob followed up with Asst. DA before the meeting and both are still pending. They are meeting with the attorneys for Sanimax tomorrow. Rob asked them to give him a follow-up call with the outcome. Audrey indicated that the minutes said this was supposed to be taken up around the 2nd week of August and Rob did not know why it was pushed back. Audrey indicated there were three verified complaints but we didn't issue any citations and asked why no citations were issued. Rob indicated the three complaints were not consecutive and did not accrue in an eight hour period. It was asked if

the complaints came from Green Bay Converting at the 2099 Shawano Avenue address; Rob indicated that the address is Sanimax. Column F is the complainant; specific individuals are listed. Audrey heard from Judy that some of their machinery had gone down again last week. Rob indicated their new expensive piece of equipment, the reductive thermal oxidizer, had gone down and we got a notification via email Tuesday of last week that they hoped to have it fixed on Friday. We got notification on Friday that it had been repaired. Audrey asked if there were complaints filed during that period when the machines were down. Rob said we did have one complaint during that time period and it was at 12:30 PM. Rob indicated we did not have any after hour complaints during those periods. It was asked if Rob will be present at the meeting between Sanimax and the DA. Rob stated from his experience this was usually a private meeting where they try to get it settled before they go into the courtroom. They don't generally ask the inspector to attend. Rob was asked when he goes on a call is this just a nuisance to these people or are they complaining that this is something that is ruining their day. Rob's opinion was yes. Some people are more vociferous than others when you go to service the complaint. If they are calling it is bothering them. Rob's opinion was the businesses are embarrassed when people come to their business. He is sure some people want to take their break outside and have their lunch. This may be an issue for residents who want to sit on their deck and have a barbecue. Rob again asked if anyone had any suggestions on the format. Rob is good with the spreadsheet idea. Rob was asked if he has enough staff to do the job. He stated it's truly got nothing to do with the department not doing their job; it is do they have enough bodies to service these calls. Rob indicated we are pulling people out of the field to service these calls. Frankly, the sanitarian's time would be better spent doing licensing inspections and dealing with more critical matters. Rob has not serviced a lot these calls after hours because he lives in the far northern part of the county; it is quicker for him to pull someone who lives closer. Audrey indicated we have to make every effort to try and get this resolved. Audrey indicated this has gone on 35-40 years and we are pro-business but need to get it resolved with their cooperation. Rob indicated an option would be to get a para-professional that can service these calls and he can keep his guys doing inspections. Judy indicated we had a temporary plan we were going to start with and we will see where it goes. It seems you don't need a sanitarian to smell an odor. Don Murray did not see the correlation to calling this a health risk and so that should relieve the sanitarian from actually doing it. This would be an ordinance part that a different commission takes up just because of the nuisance part of it and not the health risk part of it. Don indicated that he is not sure if it is a health risk at all. Judy indicated a challenge is that when the odor issue first had its place in an ordinance it was mainly a nuisance ordinance. As the ordinance evolved, it was expanded more to include human health hazards. So the nuisance part of it is still incorporated into it as part of the ordinance historically and Judy believes across the state nuisance issues still tend to be in there. We would have to

go before the County Board to make that change and frankly she would be surprised if there would be any motivation for them to take it out because many of them are looking to some department to respond to that. Audrey indicated the odor complaint is so subjective, either there is an odor or there isn't and we have no way of measuring it. It was asked if the municipality could handle the complaint. Judy indicated they used do more with it. The City of Green Bay used to come to the meetings but from what she understands the inspection department does not perform after hour's calls.

Audrey said there was a meeting a while back regarding this issue and the board recommended that the number of violations be reduced from three confirmed in an 8 hour period to two confirmed to result in a citation. The Board of Health recommended that, and it moved on to the Human Services Committee. At the last Human Services (HS) Committee meeting, the committee invited the Chamber of Commerce to come in and try to be a partner in resolving this issue. As a result of that, Judy received a communication from Fred Monique, the VP of Economic Development at the Chamber of Commerce. He wanted to meet with Judy, the sanitarians and the Chair and the Vice Chair of the Board of Health. The board couldn't all be there because it would have to notice the meeting. On August 26th there was a meeting at the Health Department. There were 7 people at the meeting: Rob, Dale, two people from Chamber of Commerce (Fred Monique and Jamie Sellen, who is a government affairs director), Judy, Dr. Tibbetts and Audrey. Prior to the meeting, Audrey asked the sanitarians to bring to the meeting a history of all of the odor complaints from 2008 to present. Shortly after the meeting started, Mr. Monique opened the meeting and stated "We were charged with rewriting the odor ordinance in two weeks and reporting back to the HS Committee" Audrey believed we were blind-sided. He went on to say that this is what they intended to do and they were charged with this from the HS Committee. The health department and board representatives began to tell Fred and Jamie the history of this ordinance and how long it took to put this in place; it took about 9 months to a year of the board and staff working with legal counsel every step of the way and the legal counsel also looked at ordinances out of the state. Fred knew that the Board of Health had made this recommendation from three to two. At some point in this meeting, Audrey said this ordinance is just fine and does not need to be rewritten. There was one word Fred used early on in the conversation and it was something like "detectable" and he thought that that word should be changed and it seemed such a minor thing to rewrite a whole ordinance and that it wasn't really possible in a two week period. After the meeting, Audrey called Juli Gray and asked her to send a copy of the HS Committee meeting minutes as the board didn't have anything before them and didn't know what had been said specifically. Audrey read part of the HS Committee meeting minutes *"Robinson addressed the comment 'working with the corporate sector', Monique said that it could mean a range of things; delaying action, leaving the ordinance unchanged, working something out with Sanimax. Robinson said*

they've done two of the things listed already. Maybe the issue is getting better, but it's not acceptable." The number of complaints in the previous months was shared." There was a lot of discussion on this issue at this meeting, talking about citations and Judy expressed *she understands people are frustrated, but stressed concerns if that would solve the problem. She recommended that question be deferred to the sanitarians who could answer best."* It goes on for several pages but this is the motion *"Motion made by Supervisor La Violette, and seconded by Supervisor Robinson to defer to the Green Bay Chamber of Commerce to be the conduit between the Brown County Human Services Committee and related business community to work on language to be inserted in the strengthening of Chapter 38 Public Nuisance Ordinance including the possibility of reducing verifiable complaints to 2, thus to be returned to the September Human Services Committee meeting."* Vote taken. **MOTION CARRIED UNANIMOUSLY."** Audrey does not interpret that they are supposed to rewrite the ordinance. If you look at the motion, they used the words strengthen and the idea of strengthening would have come from the Board of Health where it is suggested that the ordinance be changed from three verified to two verified many months ago. Dr. Tibbetts was concerned because Fred looked at all the complaints from over the years from 2008 and forward and he came up with the idea that we were picking on Sanimax, at least that is how he interpreted it. Dr. Tibbetts responded that we weren't picking on Sanimax and if you look at what we did with Packerland or JBS, Andy Nicolson was here many times with Packerland and we were working with them. Sanimax has come on occasion but there has been no representation other than what Sanimax did and it was a totally different story. We were really working with Andy and Packerland or JBS and thought we were making progress as there were no complaints and they are still in business. Those facts speak for themselves. Judy indicated Sanimax did come to these meetings quite often. Dr. Tibbetts stated that he made a comment in the spring that he hoped that Sanimax was not going to declare that everything was fixed because it was not yet. Sanimax does show up at the HS meetings with updates which Board of Health doesn't get. Audrey asked if we have heard anything since the meeting with the chamber, and Judy indicated we have not. Audrey questioned their expertise and assumes they have to have legal counsel. Audrey asked if there was anything further on this issue. We will wait to see what happens at the next Human Services meeting.

5. CORRESPONDENCE RECEIVED.

Judy received a letter from Patti Becelis that she had resigned. Judy has sent a message back to her, requesting suggestions for replacement as we are supposed to make a good faith effort to get somebody of diverse background. Judy has not heard from her. Audrey asked what we have done in the past to thank board members for serving on the committee. Judy thought we've sent

notes and she believes the County Executive's office does too. Judy will get a note out to her. We are sorry to lose her she was a good board member.

6. EDUCATIONAL PRESENTATION

Rebecca Nyberg is doing a presentation on the Affordable Care Act because it is coming and it is an issue for the citizens for the County. Rebecca has been a health educator with the County for 23 years. Rebecca's position is funded by a grant from the State called the Wisconsin Well Woman Program. She worked with uninsured women and helps them get breast and cervical cancer screenings. Basically, just about everyone she works with will be eligible to get Medicaid or purchase insurance through the exchange and she will pass on standardized information re how to apply to her clients and uninsured clients of the nursing staff.

Rebecca pulled her information from Healthcare.gov whose target is to have everything set for October 1st. What Rebecca is seeing with women she is talking to for the Well Woman Program is that they can't buy insurance or be offered insurance because of pre-existing conditions or just because with age the price was going up and they weren't able to buy it. The other part of the problem is they are showing up at emergency rooms and they are being treated and that cost is being added to the cost of insurance as it is being paid for and it is being spread out. . The Affordable Care Act was signed into law in 2010 and since then some parts of the act have been implemented: individuals can be insured under parent's policy until they are 26, Medicare discounts for prescriptions went into effect, and some rules have changed including paying for preventative exams, the lifetime limits have been removed. Companies have to pay out 80% of premium for claims and if it is more than that they have to refund the money. There have been more antifraud efforts as well. What is coming October 1st is Marketplace. Wisconsin has chosen to allow the federal government to create the Marketplace for Wisconsin.

If you don't have insurance you will be able to apply through insurance companies and the coverage could start on January 1st. If you have insurance through your employer, you don't have to go to the exchange. The plans have to meet premiums and minimums and it will be laid out in simple language with comparables which has not been done before.

The affordability will be in two ways: that everyone in the exchange will pay for insurance and it will spread out to a larger pool of people. In the past, if a person tried to go get insurance on his/her own, he/she would be rated and if there were too many health issues, the person would have an increase in the premium. If a person had extremely low premiums the person had a low health risk. Now it is going to be evened out. Younger people are going to be paying a little more. Older people are going to be paying a little less and these

premiums won't have these huge switches between them. Customer support will be provided. Qualified plans have to meet standards to be in the marketplace and they have to provide these essential services which were shown on a slide. You would want to shop in the marketplace because you may be eligible for tax credits in order to help pay for it. There are 4 levels of plans and the higher the plan pays will have a higher premium with less out of pocket and vice versa. The silver plan is the preferred plan. Medicare is at the gold level. Anyone under 30 can buy a catastrophic plan. Starting 2014, you have to buy coverage for 2014 and when you fill out your taxes for 2015 there will be a place to check that you have had coverage you've had for the last 12 months. They will charge a fee on your taxes if you did not have coverage for 2014. It will be a minimum of \$95.00 for one person for the first year or 1% of your income. So if you make \$30,000 per year and you don't buy insurance and didn't have a hardship waiver the fee would be \$300. There is an option for small business in that they will all be on one pool. The businesses will be able to buy insurance for their employees and get a tax credit. This year it will be for businesses with 50 or less employees. In a couple years they will open up the exchange to employers with 100 or less. There are five or six rating areas. If you live in Brown County there are going to be 5 or 6 companies that are going to be selling in the exchange. You also have to have a social security number and be legal to be in the United States in order to buy insurance on the exchange.

Open enrollment is October 1 to March 31st. If you buy insurance in the market place before December 15th it will start January 1st. If you buy it between January 15th and March 15 it would start the next month from when you buy the insurance. The next year the open enrollment will be from October to December. Hospitals are reviewing their charitable policies.

If you have a qualifying event you can buy insurance between the open enrollment periods. These include having a baby, getting married or switching jobs and insurance but a special enrollment period exception does not include getting sick.

12% of Brown County's population does not have insurance. Majority have it through work. In Wisconsin, we turned down the federal help to pay for the Medicaid. In Wisconsin, the state is paying the least amount of money than any state on telling people on the affordable care act and helping people sign up. Therefore, volunteer groups are being asked to help.

Discussion about personal beliefs about the Marketplace.

Don thanked Rebecca and Meredith for their factual presentation.

7. DIRECTOR'S REPORT

Judy updated the Board on the recruitments. Today the department interviewed the candidates for Juli's position and had 134 applicants. A decision will be made in the next week. Juli's last day is this Friday. Juli came in 2001 and she will be missed. The department is preparing for the interviews for the nurse manager position. The candidate will be interviewed in the next couple of weeks. Requests have been completed to fill the public health nurse and sanitarian vacancy created by Rob moving into the manager position.

Budget changes – For the first time in history after the department submitted the budget, the department made a major change in it from the 40 hour work week based on concerns regarding environmental staff heavy work periods. They have an extremely busy period from March until Fall and to have them trying to flex time because of festivals, Packer games and having more animal bites, we decided switching to 40 hour exempt was not going to be a good option for them. Instead, we looked at some of the issues and decided to go back to 37.5 hours but to ask for a bi-lingual health aide to help serve their bilingual needs in inspections and help with other activities that they are involved in that could be done by an ancillary staff person. Some ideas were odor follow up and also perhaps doing follow ups on more routine animal bites. We already have a clerical staff person that assists them but there are other types of activities that could be looked at. Audrey asked if any of the professional staff are in unions anymore. Judy confirmed they are not. Audrey asked if the 37.5 was a result of being in the union. Judy indicated probably but not for sure because it has been so long. Judy thought that when we were talking about it we thought if they were going 40 hours a week they would automatically be exempt but that is not necessarily the case. Judy did talk with HR and it seemed there are several considerations depending on the position and situation.

Communicable disease report – We have new active pulmonary TB case in a 31 year old individual. It appears the assumption is that the exposure was in the course of his work on the road. He is a construction worker who travels a lot and he was going to areas where he shared rooms with a lot of potential for exposure. We have been doing the follow ups. There are challenges with his treatment because he is having a lot of reactions.

We also have a Hepatitis A and the department is unaware of the potential exposure. This person is not in a sensitive occupation such as food handling or health care.

Judy passed out a statistic sheet for July.

8. ALL OTHER BUSINESS AUTHORIZED BY LAW

None

9. ADJOURNMENT / NEXT MEETING

The next meeting is tentatively scheduled for November 12th at 5:00 pm.

MOTION: To adjourn meeting at 6:38 PM Van Deurzen / Tibbetts

MOTION CARRIED